

**COMBINED DECLARATION AND POWER OF ATTORNEY****814-067.037-1**  
(Docket Number)

As a below named inventor, I hereby declare that:

- my residence, post office address and citizenship are as stated below next to my name;
- I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **DISTRIBUTED EMERGENCY LIGHTING SYSTEM HAVING SELF-TESTING AND DIAGNOSTIC CAPABILITIES**,
- the specification of which is attached hereto unless the following box is checked: ☐. If the box is checked,  
the application was filed on  
as U.S. Application Number  
or PCT International Application Number  
and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application			Priority Not Claimed
(Application Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/>
(Application Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/>

To the extent permitted by rule or law, I hereby incorporate by reference the Prior Foreign Application(s) listed above.

I hereby claim the benefits under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:

<b>60/203,878</b> (Provisional Application Number)	<b>12/05/2000</b> (Day/Month/Year Filed)
(Provisional Application Number)	(Day/Month/Year Filed)

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability, as defined in 37 CFR §1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

(Application Number)	(Day/Month/Year Filed)	(Status—patented, pending, abandoned)
(Application Number)	(Day/Month/Year Filed)	(Status—patented, pending, abandoned)

I hereby appoint the attorney(s) and/or agent(s) assigned to the customer number listed below, as may from time to time be amended, belonging to the firm of **Ware, Fressola, Van Der Sluys & Adolphson LLP**, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number

4955



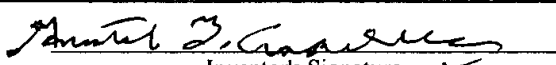
Address all telephone calls to: Ware, Fressola, Van Der Sluys & Adolphson LLP at (203) 261-1234. Address all correspondence to:

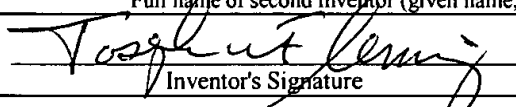
Customer Number

4955



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>Gustaf T. APPELBERG</b> Full name of sole or first inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)	
 Inventor's Signature	<u>May 10, 2001</u> Date
<b>Fairfield, Connecticut</b> Residence	<b>USA</b> Citizenship
Post Office Address: <b>430 Reid Street, Fairfield, Connecticut 06430, USA</b>	

<b>Joseph W. FLEMING</b> Full name of second inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)	
 Inventor's Signature	<u>May 10, 2001</u> Date
<b>Ramsey, New Jersey</b> Residence	<b>USA</b> Citizenship
Post Office Address: <b>16 Shadyside Road, Ramsey, New Jersey 07446, USA</b>	

Full name of third inventor (given name, middle initial, FAMILY NAME(S) IN UPPER CASE)	
_____ Inventor's Signature	_____ Date
_____ Residence	_____ Citizenship
Post Office Address:	

☐ Additional inventors are being named on separately numbered sheets attached hereto.

Practitioner's Docket No. 814-067.037

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

☒ In re application of: G. Appelberg et al.

Application No.: / To Be Assigned Group No.

Filed: Herewith Examiner:

For: EMERGENCY LIGHTING SYSTEM HAVING SELF-TESTING AND DIAGNOSTIC CAPABILITIES

☐ Patent No.: Issued:

*\*NOTE: Insert name(s) of inventor(s) and title also for patent. Where statement is with respect to a maintenance fee payment, also insert application number and filing date, and add Box M. Fee to address.*

**STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.9(c-f) and 1.27(b-d))**

With respect to the invention described in

☒ the specification filed herewith.

☐ application no. / , filed .

☐ patent no. , issued .

**I. IDENTIFICATION OF PERSON MAKING STATEMENT AND RIGHTS AS A  
SMALL ENTITY**

I hereby state that I am

*(complete either (a), (b), (c) or (d) below)*

(a) Independent Inventor

☐ a below named independent inventor, and that I qualify as an independent inventor, as defined in 37 CFR 1.9(c), for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office.

(b) Noninventor Supporting a Claim by Another

☐ making this statement to support a claim by

for a small entity status for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code. I hereby state that I would qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, if I had made the above-identified invention.

## (c) Small Business Concern

- ☐ the owner of the small business concern identified below:
- ☒ an official of the small business concern empowered to act on behalf of the concern identified below:

Name of Concern E-Lite Technologies, Inc.Address of Concern 2285 Reservoir Avenue, Trumbull, CT 06611

\_\_\_\_\_ and  
that the above identified small business concern qualifies as a small business concern, as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

## (d) Non-Profit Organization

- ☐ an official empowered to act on behalf of the nonprofit organization identified below:

Name of Organization \_\_\_\_\_

Address of Organization \_\_\_\_\_

## TYPE OF ORGANIZATION

- ☐ University or Other Institution of Higher Education
- ☐ Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c) (3))
- ☐ Nonprofit Scientific or Educational Under Statute of State of the United States of America  
(Name of State \_\_\_\_\_ )  
(Citation of Statute \_\_\_\_\_ )
- ☐ Would Qualify as Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c) (3)), if Located in the United States of America
- ☐ Would Qualify as Nonprofit Scientific or Educational Under Statute of State of the United States of America, if Located in the United States of America  
(Name of State \_\_\_\_\_ )  
(Citation of Statute \_\_\_\_\_ )

and that the nonprofit organization identified above qualifies as a nonprofit organization, as defined in 37 CFR 1.9(e), for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code.

**II. OWNERSHIP OF INVENTION BY DECLARANT**

I hereby state that rights under contract or law remain with and/or have been conveyed to the above identified

☐ person  
(item (a) or (b) above)

☒ concern  
(item (c) above)

☐ organization  
(item (d) above)

EXCEPT, that if the rights held are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held (1) by any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, (2) any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or (3) a nonprofit organization under 37 CFR 1.9(e).

☒ no such person, concern, or organization

☐ person, concerns or organizations listed below\*

\*NOTE: Separate statements are required from each named person, concern or organization having rights to the invention as to their status as small entities. (37 CFR 1.27)

Full Name \_\_\_\_\_

Address \_\_\_\_\_

☐ INDIVIDUAL      ☐ SMALL BUSINESS CONCERN      ☐ NONPROFIT ORGANIZATION

Full Name \_\_\_\_\_

Address \_\_\_\_\_

☐ INDIVIDUAL      ☐ SMALL BUSINESS CONCERN      ☐ NONPROFIT ORGANIZATION

**III. ACKNOWLEDGEMENT OF DUTY TO NOTIFY PTO OF STATUS CHANGE**

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

**IV. DECLARATION***(check the following item, if desired)*

NOTE: The following verification statement need not be made in accordance with the rules published on Oct. 10, 1997, 62 Fed. Reg. 52,131, effective Dec. 1, 1997.

NOTE: "The presentation to the Office (whether by signing, filing, submitting, or later advocating) of any paper by a party, whether a practitioner or non-practitioner, constitutes a certification under § 10.18(b) of this chapter. Violations of § 10.18(b)(2) of this chapter by a party, whether a practitioner or non-practitioner, may result in the imposition of sanctions under § 10.18(c) of this chapter. Any practitioner violating § 10.18(b) may also be subject to disciplinary action. See §§ 10.18(d) and 10.23(c)(15)." 37 C.F.R. § 1.4(d)(2).

☒ I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

**V. SIGNATURES***(complete only (e) or (f) below)***(e)**

NOTE: All inventors must sign the statement.

\_\_\_\_\_  
Name of Inventor

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Inventor

\_\_\_\_\_  
Name of Inventor

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Inventor

\_\_\_\_\_  
Name of Inventor

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Inventor

*(add lines for any additional inventors who must sign)*

or

(f)

NOTE: The title of the person signing on behalf of a concern or nonprofit organization should be specified.

Name of Person Signing Gustaf T. Appelberg

Title of Person President  
(if signing on behalf of a concern or non-profit organization)

Address of Person Signing 2285 Reservoir Avenue  
Trumbull, CT 06611

SIGNATURE *Gustaf T. Appelberg* DATE 5/10/00